FORM D

SEC 1972 (6-02)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: April 30,2008
Estimated average burden hours per response...



Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Third Stream Bioscience, Inc. Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4(6)	D ULOE PROCESSED
Type of Filing: New Filing Amendment	
A, BASIC IDENTIFICATION DATA	FEB 0 9 2007
A Company of the Astronomy	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	THOMSON
Third Stream Bioscience, Inc.	FINANCIAL
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	July Company
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed	lease specify): 06 2007
Actual or Estimated Date of Incorporation or Organization: Month Year	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	. A notice is deemed filed with the U.S. Securities elow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repo thereto, the information requested in Part C, and any material changes from the information previously supplied with the SEC.	rt the name of the issuer and offering, any changes lied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for substitution ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales in the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal e appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	xemption. Conversely, failure to file the ess such exemption is predictated on the

	, ,	, A. BASIC IDE	NTIFICATION DATA	·	·
2. Enter the information re					
 Each promoter of t 	he issuer, if the iss	uer has been organized wi	ithin the past five years;		
 Each beneficial ow 	ner having the pow	er to vote or dispose, or dir	ect the vote or disposition of	of, 10% or more of	a class of equity securities of the issuer
 Each executive off 	icer and director o	f corporate issuers and of	corporate general and man	aging partners of	partnership issuers; and
 Each general and r 	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	·			
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	1 - 100			
Business or Residence Adda	ress (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·			
Business or Residence Add	ress (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			· ·	
Business or Residence Add	ress (Number and	d Street, City, State, Zip C	Code)		
·	(Use bl	ank sheet, or copy and use	e additional copies of this	sheet, as necessary	у)

B. INFORMATION ABOUT OFFERING												
							Yes	No E				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is								s				
											Yes	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full Name (Last name first, if individual)												
Business or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Cip Code)				····		
Name of As	sociated B	oker or De	aler									
States in W	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			<u>.</u>			
(Check	"All State:	s" or check	individua	States)			***************************************	.,			☐ Al	1 States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name (Last name	first, if ind	ividual)							· -		
Business or	Residence	Address (Number an	d Street, C	ity, State,	Zip Code)						
Name of As	sociated B	oker or De	aler						 .			
States in WI	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	s" or check	individua	States)			*************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			□ Al	1 States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Full Name (Last name	first, if ind	ividual)				·=	_				
Business or	Residence	Address ()	Jumber an	d Street C	ity State	Zin Code)		 -				
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check "All States" or check individual States)								l States				
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	MN OK	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			Amount Already
	Type of Security	Offering Pric	B	Sold
	Debt			\$
	Equity	\$ 820,050.00	<u> </u>	\$ 820,050.00
	Convertible Securities (including warrants)	\$	_	
	Partnership Interests	\$	_	\$
	Other (Specify)	\$		s
	Total	\$ 820,050.00) 	\$_820,050.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	2		Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	13		\$ 820,050.00
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)	·		\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505			s
	Regulation A	•	_	\$
	Rule 504	,	_	s
	Total			\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure i not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			s
	Printing and Engraving Costs			\$_1,000.00
	Legal Fees		V	\$ 37,000.00
	Accounting Fees	•••••		\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)	***********		\$
	Other Expenses (identify) Mailing Costs			\$ 1,000.00
	Total			\$_39,000.00

	C. OTTERRIO TRICE, NOME	on of hivestons, she should have one	***************************************	
	b. Enter the difference between the aggregate offerin and total expenses furnished in response to Part C — Q proceeds to the issuer."	uestion 4.a. This difference is the "adjusted gross		781,050.00 \$
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part Company	purpose is not known, furnish an estimate and he payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		 \$	_ 🗆 \$
	Purchase of real estate			S
	Purchase, rental or leasing and installation of mach	inery		
	and equipment			
	Construction or leasing of plant buildings and facil	ities	□ \$	S
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	s or securities of another	¬ ¢	650,000.00
			• •	
	Repayment of indebtedness			
	Working capital	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	S 131,030.00
	Other (specify):	·	□ \$	_ 🗆 \$
			s	_ 🗆 \$
	Column Totals			
	Total Payments Listed (column totals added)	-		
		D. FEDERAL SIGNATURE		· ·
sig	e issuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commis	sion, upon writt	
Iss	uer (Print or Type)	Sightature /	Date	
	nird Stream Bioscience, Inc.	Muly /6 000	January 3/, 20	007
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Ru	dyard L. Istvan	Chief Executive Officer		

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- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)